PTO/SB/22 (12-04)
Approved for use through 7/31/2006. OMB 0651-0031
U.S. Patent and Trad emark Office; U.S. DEPARTMENT OF COMMERCE 2001 to a collection of information unless if displays a collection of information unless if

	ISION OF TIME UNDER 3 FY 2005	of information unless if displays a valid OMB control number Docket Number (Optional) 393032023900			
(Fees pursuant to the Co	nsolidated Appropriations Act,				
Application Number 09/824,483			Filed	March 30, 2001	
For CONTENT DISTR	RIBUTION SYSTEM AND C	ONTENT DISTRIB	JTION.METHOD		
Art Unit 3625			Examiner	Mark A. Fadok	
identified application.	he provisions of 37 CFR 1.1				
The requested extension	and fee are as follows (che	eck time period desi	red and enter the a	appropriate fee below):	
<u> </u>	<u>Fee</u>			<u>e</u>	
One month	(37 CFR 1.17(a)(1))	\$120	\$60	\$ 120.00	
Two months	Two months (37 CFR 1.17(a)(2))		\$225	\$	
Three month	ns (37 CFR 1.17(a)(3))	\$1020	\$510	\$	
Four months	s (37 CFR 1.17(a)(4))	\$1590	\$795	\$	
Five months	(37 CFR 1.17(a)(5))	\$2160	\$1080	\$	
Applicant claims	small entity status. See 37 (CFR 1.27.			
	nount of the fee is enclosed.				
\vdash	t card. Form PTO-2038 is a				
The Director has	already been authorized to	charge fees in this a	application to a De	posit Account.	
The Director is he Deposit Account	ereby authorized to charge a Number <u>03-1952</u>	I-have enclose	d a duplicate copy m (PTO/SB/17) is	of this sheet. Fee	
I am the a	oplicant/inventor.				
as	ssignee of record of the enti Statement under 37 CFR			96).	
at	torney or agent of record. F	Registration Numbe	r		
x a	torney or agent under 37 Cl				
'	Registration number if acting u	ınder 37 CFR 1.34	48,231	•	
			Nove	mber 7, 2005	
	Signature		Date		
	Mehran Arjomand	(213) 892-5630 Telephone Number			
NOTE: Signatures of all the than one signature is require-	Typed or printed name inventors or assignees of record of the d, see below.	entire interest or their repr	•		
Total of	1 forms are subm	itted.			

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV644664985 US, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below. (Marco Jimenez)

Dated: November 7, 2005

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PTO/SB/17 (12-04v2)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			⊢	Complete if Known								
			4818).	7.55.000.00.000.000.000.000.000.000.000.		09/824,483						
FEE TRANSMITTAL				Filing Date March 30, 2								
For FY 2005				That Hamed inventor			o TOKUHIRO et al.					
F01 F1 2005				Examiner Name Ma		lark A. Fadok						
Applicant claims small entity status. See 37 CFR 1.27				AITOIII		3625						
TOTAL AMOUN	NT OF PAYMENT	(\$) 120.00		Attorney Docket	No.	393032023900						
METHOD OF PAYMENT (check all that apply)												
Check Credit Card Money Order None Other (please identify):												
x Deposit Account Deposit Account Number: 03-1952 Deposit Account Name:												
For the a	For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)											
Object for (2) and below assessed below assessed for the Giller for												
x Charge any additional fee(s) of underpayment of x Credit any overpayments x Credit any overpayments												
FEE CALCUL												
1. BASIC FILING	G, SEARCH, AND EX							,				
	FII	ING FEES Small Entity	SEAF	RCH FEES Small Entity	EXAMIN	AMINATION FEES Small Entity						
Application Ty	rpe Fee (\$		Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Pai	d (\$)				
Utility	300	150	500	250	200	100						
Design	200	100	100	50	130	65						
Plant	200	100	300	150	160	80						
Reissue	300	150	500	250	600	300						
Provisional	200	100	0	0	0	0						
2. EXCESS CLA	NIM FEES						_	nall Entity Fee (\$)				
Fee Description							Fee (\$)					
Each claim over 20 (including Reissues) Each independent claim over 3 (including Reissues)							50 200	25 100				
I -	-	iding Reissues)					360	180				
Multiple dependent claims			Fee Pa	id (\$)	Multiple Dependent C			100				
Total Claims	Total Claims		<u> </u>			ee (\$) Fee Paid (\$)						
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Indep. Claims	Extra Claims	Fee (\$)	Fee Pa	id (\$)								
	- = 7	· =		 								
3. APPLICATIO			. ,									
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer												
listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)												
100 = /50 (round up to a whole number) x =												
4. OTHER FEE(S) Fees Paid (\$)												
Non-English Specification, \$130 fee (no small entity discount)												
Other (e.g., late filing surcharge): 1251 Extension for response within first month 120.00												
SUBMITTED BY V V V												
Signature	M	$\overline{}$		Registration No.	48,231	Telephone	(213) 892-	5630				
Name (Print/Type)	Mehran Arjomano	\sim		Attorney/Agent)		Date						
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Express Mail - EV644664985US